



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

9/4/14

Margie Fuller
3912 E Aave NE
Cedar Rapids IA 52402

Dear Margie ,

This letter is in regards to the compliance check of your Level B, Registered Child Development Home completed on 8/29/14. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

The children's files must be updated annually with the emergency medical authorization completed yearly. If the parent wants to review, edit and resign and date the intake and emergency medical authorization instead of completing a new form that is ok. I suggest you pick a date, such as the first of the year, beginning of school, your birthday or anniversary, Valentine's Day, ect. On that date I suggest you double check for a current physical form and immunizations (if there were any updates) and have the parents redo or resign the emergency medical and intake information.

☐ 110.5(8) An individual file is maintained for each child and **updated annually or when there are changes**. Each file contains: **needed for the two children you were provider child care for who were in foster family care respite care. The foster parents need to make those arrangements in advance so that can be completed in advance. Also child under 24 months A needed an update of her paper work as it was more than a year**

☐ 110.5(8)a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and telephone number. **Need for: .**

☐ 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency. **Need for: A .**

☐ 110.5(8)c A signed medical consent from the parent authorizing emergency treatment. **Need for: A.**

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance. **Need for: 2 new children in respite foster care .**

☐ 110.5(8)e For school aged children: An annual statement of health condition signed by the parent or legal guardian, annually from date of admission physical. **Need for: school aged child L and M .**

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely**

Linn County DHS 411 3 St SE, suite 160, Cedar Rapids IA 52401-9828 319 892-6800

address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.

☐ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.

Please sign and date below, and return this form in the provided envelope by: 45 days of receipt.

X _____
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6826 if you have any questions regarding this letter.

Sincerely,

Lisa Wesbrook
Social Worker II

Irene Holzwarth
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).